

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000173128

FILED
Apr 24, 2008
Secretary of State

Entity Name: GIOVANNI JACKSONVILLE BEACH, INC.

Current Principal Place of Business:

1161 BEACH BOULEVARD
JACKSONVILLE BEACH, FL 32250

New Principal Place of Business:

Current Mailing Address:

1161 BEACH BOULEVARD
JACKSONVILLE BEACH, FL 32250

New Mailing Address:

FEI Number: 71-1007227

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ACIREALE, GIOVANNI
1161 BEACH BOULEVARD
JACKSONVILLE BEACH, FL 32250 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ACIREALE, GIOVANNI
Address: 209 CLEAR LAKE DRIVE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D () Delete
Name: ACIREALE, AGNELLA N
Address: 209 CLEAR LAKE DRIVE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D () Delete
Name: ACOREALE, ANTONIO
Address: 209 CLEAR LAKE DRIVE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: ACIREALE, ANTONIO
Address: 209 CLEAR LAKE DRIVE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANTONIO ACIREALE

D

04/24/2008

Electronic Signature of Signing Officer or Director

Date